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27256

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01/04/2005

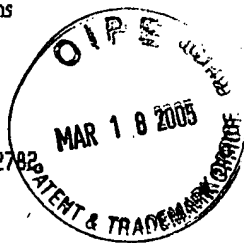
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SUITE 250
SOUTHFIELD, MI 48034

03/18/2005 MGBREH2 00000049 500476

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01 FC:1501 1400.00 DA

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Jo Anne Croskey (Depositor's name)
Jo Anne Croskey (Signature)
March 18, 2005 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

09/682,782

10/18/2001

Thomas D. Schaefer

GEMS0123PUS

5442

TITLE OF INVENTION: FILAMENT CIRCUIT RESISTANCE ADJUSTING APPARATUS TECHNICAL FIELD

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|-----------|-----------------|------------------|----------|
|-------------|--------------|-----------|-----------------|------------------|----------|

nonprovisional

NO

\$1400

\$300

\$1700

04/04/2005

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

VU, JIMMY T

2821

378-131000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Bill Panagos

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GE Medical Systems Global Technology Co., LLC

Waukesha, WI

USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Jeffrey J. Chapp
Jeffrey J. Chapp

Date

March 18, 2005

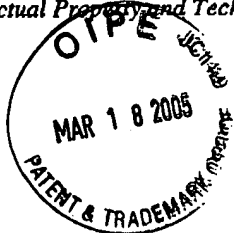
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50,579

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Phone: (248) 223-9500****To: Issue Fee**
Company: USPTO
Fax No.: 703-746-4000

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From: Jeffrey J. Chapp
Date: March 18, 2005
Your File No.: 09/682,782
Our Ref. No.: 15XT6093 (GEMS 0123 PUS)
**Comments: See attached Issue Fee Transmittal relative to
Serial No. 09/682,782. Thank you.**
Total Pages (incl. Cover sheet) 2

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Jo Anne Croskey
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